UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

RC PETITION

| Case No. 18-RC-289570 | Date Filed January 27, 2021 |
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certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 8496 Greenway Blvd Raven Software / Activision Blizzard, Inc. (single employer) 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 8496 Greenway Blvd WI Middleton 53562 Brian Raffel 3c. Tel. No. 3d. Cell No. 3f. E-Mail Address 3e. Fax No. braffel@ravensoftware.com (608) 833-5791 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Software & Programming Video games Middleton, WI 5b. Description of Unit Involved 6a. No. of Employees in Unit: 32 Included: 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the Petitioner? Yes [●] No [Check One: Request for recognition as Bargaining Representative was made on (Date) 1/21/2022 and Employer declined recognition on or about (Date) (If no reply received, so state). Yes 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No.

INSTRUCTIONS: Unless e-Filed using the Agency's website, www nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a

| | | 10e. Fax No. | 10f. E-Mail Address | |
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| 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to | | 11a. Election Type: Manual _ | _ Mail Mixed Manual/Mail | |
| any such election. | | | | |
| 11b. Election Date(s): | 11c. Election Time(s): | 11d. Election Location(s): | | |
| ASAP | mail ballot | mail ballot | | |
| 12a. Full Name of Petitioner (including local nam | 12b. Address (street and number, ci | ty, state, and ZIP code) | | |
| Angela W Thompson Esq. Communications Workers of America, AFL-CIO | 501 3rd St NW DC Washington 20001 | | | |
| 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state) | | | | |

one

 12d. Tel No.
 12e. Cell No.
 12f. Fax No.
 12g. E-Mail Address atthompson@cwa-union.org

 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
 12g. E-Mail Address atthompson@cwa-union.org

13a. Name and Title 13b. Address (street and number, city, state, and ZIP code)

 13c. Tel No.
 13d. Cell No.
 13e. Fax No.
 13f. E-Mail Address

 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Signature a.m. Title Date

Angela W Thompson Esq. Special Counsel for Strategic Ini latives 01/26/2022 02:06:03 PM
WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

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PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

Attachment

Employees Included All Raven QA Testers and Raven QA Leads

Employees Excluded
All statutorily excluded employees

| DO NOT WRITE IN THIS SPACE | |
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